

CERTIFICATE OF ATTENDANCE

2015 SPRING PUBLIC DEFENDER CONFERENCE

Presented by
MISSISSIPPI OFFICE OF STATE PUBLIC DEFENDER
PUBLIC DEFENDER TRAINING DIVISION

April 21 - 24, 2015
Hollywood Casino & Hotel
Bay St. Louis, MS

NAME: _____ BAR NUMBER: _____

THIS CONFERENCE OFFERS A TOTAL OF **15.25** HOURS OF **CLE** CREDIT INCLUDING **1** HOUR OF ETHICS/PROFESSIONALISM.

I ATTENDED THE **ETHICS** HOUR: ☐ YES ☐ NO

TOTAL NUMBER OF **CLE** HOURS ATTENDED: _____

SIGNATURE _____

DATE _____

IT IS YOUR RESPONSIBILITY TO REPORT THE HOURS INDICATED ABOVE TO OTHER STATES FOR **CLE** CREDIT.

PLEASE SUBMIT THIS FORM WITH PAYMENT WITHIN **30 DAYS** OF THIS CONFERENCE
TO:

MISSISSIPPI COMMISSION ON CONTINUING LEGAL EDUCATION
Tracy Graves, Administrator
Post Office Box 369
Jackson, Mississippi 39205-0369

Please make your check payable to: **Mississippi Commission on CLE** and include \$1.50 for **each** hour attended. (\$22.88, if you attend the entire conference.)